

AO 440 (Rev. 8/01) Summons in a Civil Action

UNITED STATES DISTRICT COURT

District of
MASSACHUSETTS

CLERK'S OFFICE

03 APR -1 P 2:00

SUMMONS IN A CIVIL CASE

DISTRICT OF MASS.

MEDICAL IMAGING SOLUTIONS GROUP, INC.

V.

ALKOMED TECHNOLOGIES, LLC and ALEXANDER KOUSPAKIAN

CASE NUMBER: 05-10080 DPW

TO: (Name and address of Defendant)

Alexander Kouspakian
298 Commonwealth Avenue
Boston, Massachusetts

YOU ARE HEREBY SUMMONED and required to serve on PLAINTIFF'S ATTORNEY (name and address)

Thomas E. Romano
Blish & Cavanagh LLP
30 Exchange Terrace
Providence, RI 02903

an answer to the complaint which is served on you with this summons, within twenty (20) days after service of this summons on you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. Any answer that you serve on the parties to this action must be filed with the Clerk of this Court within a reasonable period of time after service.

SARAH A. THORNTON

CLERK

(By) DEPUTY CLERK

DATE

3/24/05

AO 440 (



Suffolk County Sheriff's Department • 45 Bromfield Street • Boston, MA 02108 • (617) 989-6999
 Suffolk, ss. April 4, 2005

Service of

NAME OF

Check

I hereby certify and return that on 3/30/2005 at 9:30AM I served a true and attested copy of the Summons and Amended Complaint in this action in the following manner: To wit, by leaving at the last and usual place of abode of Alexander Kousspakian, , 298 Commonwealth Avenue Apt G-1 Boston, MA and by mailing 1st class to the above address on 4/1/2005. Basic Service Fee (LU) (\$20.00), U.S. District Court Fee (\$5.00), Travel (\$1.00), Postage and Handling (\$3.00), Attest/Copies (\$10.00) Total Charges \$39.00

Deputy Sheriff Edward J. Tobin

Edward J. Tobin
 Deputy Sheriff

☐ Other (specify): _____

STATEMENT OF SERVICE FEES

TRAVEL	SERVICES	TOTAL
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DECLARATION OF SERVER

I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.

Executed on _____ Date _____ Signature of Server _____

 Address of Server

70160200